

DOCKET No. 363

APPLICANT/PATENTEE: Mooreville et al.

SERIAL/PATENT No: \_\_\_\_\_ FILED/ISSUED: Herewith

FOR: SURGICAL PENILE DILATOR INSTRUMENT AND METHOD FOR ITS USE

**VERIFIED STATEMENT CLAIMING SMALL ENTITY  
STATUS - INDEPENDENT INVENTOR(S)**

As below-named inventor(s), I/we hereby declare that I/we qualify as independent inventor(s) as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of title 35, United States Code, to the Patent and Trademark Office with regard to the above-titled invention described in

\_\_\_\_\_ the specification filed herewith  
\_\_\_\_\_ application serial no. \_\_\_\_\_, filed \_\_\_\_\_  
\_\_\_\_\_ patent no. \_\_\_\_\_, issued \_\_\_\_\_

I/we have not assigned, granted, conveyed or licensed and am/are under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(c) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I/we have assigned, granted, conveyed, or licensed or am/are under obligation to assign, grant, convey or license any rights in the invention are listed below:

\_\_\_\_\_ no such person, concern or organization  
\_\_\_\_\_ persons, concerns or organizations listed below  
(separate verified statements required from each,

37 CFR 1.9(e)

Full

Name \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_ individual \_\_\_\_\_ small business concern \_\_\_\_\_ nonprofit organ.

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I/we acknowledge the duty to file, in this application/patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of payment, the earliest of the issue fee or any maintenance fee due after the date on which the small entity status is no longer appropriate (37 CFR 1.28(b)).

I/we hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Inventor's

name Michael Mooreville

Signature Michael Mooreville Date 7/12/98

Inventor's

name Sorin Adrian

Signature Adrian Sorin Date 7.12.1998

0912327-073888

UTILITY PATENT APPLICATION

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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"SURGICAL PENILE DILATOR INSTRUMENT AND METHOD FOR ITS USE"**

the specification of which

(check one) ☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Serial No. 60/088,421      Filing Date June 8, 1998      Status Active

I hereby appoint the following attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:  
William H. Meise, Registration No. 27,574

8682/07/22/2000

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Direct all correspondence and telephone calls to: William H. Meise, P.O. Box 344,  
Penns Park, PA 18943, (215) 598-3732.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor:

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Inventor's signature (in full, no initials) \_\_\_\_\_ Date: 7-12-98

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Full name of second inventor:

Sorin (NMN) Adrian

Adrian Sorin

Inventor's signature (in full, no initials) \_\_\_\_\_

07.12.1998  
Date

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Residence: 311 Fawn Hill Lane, Penn Valley, Montgomery County, PA.

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